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## BIB DATA SHEET

CONFIRMATION NO. 1891

| SERIAL NUMBER   | FILING or 371(c)<br>DATE  | CLASS  | GROUP ART UNIT                  | ATTORNEY DOCKET<br>NO.                                       |                         |                               |
|---|---|--|---------------------------------|--|-------------------------|-------------------------------|
| 10/591,387  | 07/13/2007  | 417  | 4137                            | BONNP42  |                         |                               |
| <b>RULE</b>   |   |  |                                 |  |                         |                               |
| <b>APPLICANTS</b><br>Gianni Candio, Lonigo (VI), ITALY;<br>Enrico Faccio, Cologna Veneta (VR), ITALY;<br>Andrea Tonin, Brogliano (VI), ITALY; |   |  |                                 |  |                         |                               |
| <b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/EP05/50936 03/03/2005   |   |  |                                 |  |                         |                               |
| <b>** FOREIGN APPLICATIONS *****</b><br>ITALY VI2004A000035 03/04/2004  |   |  |                                 |  |                         |                               |
| <b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** ** SMALL ENTITY **</b><br>08/14/2007   |   |  |                                 |  |                         |                               |
| Foreign Priority claimed  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   | <input type="checkbox"/> Met after Allowance | <b>STATE OR<br/>COUNTRY</b>     | <b>SHEETS<br/>DRAWINGS</b>                                   | <b>TOTAL<br/>CLAIMS</b> | <b>INDEPENDENT<br/>CLAIMS</b> |
| 35 USC 119(a-d) conditions met  | <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No   |  | ITALY                           | 3  | 13                      | 1                             |
| Verified and<br>Acknowledged  | /JEANNIE M/NA AHN/<br>Examiner's signature  |  |                                 |  |                         |                               |
| <b>ADDRESS</b><br>IP STRATEGIES<br>12 1/2 WALL STREET<br>SUITE E<br>ASHEVILLE, NC 28801<br>UNITED STATES                                      |   |  |                                 |  |                         |                               |
| <b>TITLE</b><br>Modular Volumetric Compressor   |   |  |                                 |  |                         |                               |
| <b>FILING FEE<br/>RECEIVED</b><br>515   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |  |                                 | <input type="checkbox"/> All Fees                            |                         |                               |
|   |   |  |                                 | <input type="checkbox"/> 1.16 Fees (Filing)                  |                         |                               |
|   |   |  |                                 | <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) |                         |                               |
|   |   |  |                                 | <input type="checkbox"/> 1.18 Fees (Issue)                   |                         |                               |
|   |   |  |                                 | <input type="checkbox"/> Other _____                         |                         |                               |
|   |   |  | <input type="checkbox"/> Credit |  |                         |                               |